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Number of Pages (including this page)

Date: May 6, 2005

To: **EXAMINER RAJ K. JAIN**

Location: United States Patent and Trademark Office

Fax No.: 703.872.9306

From: Indira Saladi, Registration No. 45,759

Subject: CM05154H S/N 10/622,048

Confirmation No.: 2270


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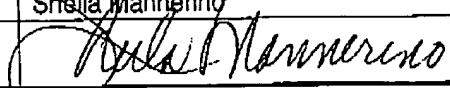
MESSAGE:

Enclosed herewith, please find AMENDMENT for filing in the above-identified application.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/622,048
		Filing Date	July 17, 2003
		First Named Inventor	Ekl, et al.
		Group Art Unit	2664
		Examiner Name	Raj K. Jain
Total Number of Pages in this Submission	8	Attorney Docket Number	CM05154H

ENCLOSURES		(check all that apply)
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks Facsimile Transmittal		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Indira Saladi	Registration No.	45,759
Signature			
Date	May 6, 2005		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number 703-872-9306 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on the date listed below:			
Typed or printed name	Sheila Mannering		
Signature		Date	May 6, 2005

Appl. No. 10/622,048
Amdt. Dated May 6, 2005
Reply to Office Action of February 8, 2005

Docket No. CM05154H
Customer No. 22917

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APPLICANT(S)	Ekl, et al.	GROUP ART UNIT:	2664
APPLN. NO.:	10/622,048	EXAMINER:	Raj K. Jain
FILED:	July 17, 2003	Confirmation No.	2270
TITLE:	METHOD FOR PERFORMING A SEAMLESS HANDOFF IN A COMMUNICATION SYSTEM		

AMENDMENT

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated February 8, 2005, Paper No. 2, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.